

EARLY VOTING BALLOT TRANSPORT STATEMENT

~This form is to be completed each time the ballot box LOCK is OPENED for ballot transport~

At Location

Election Type: General Election

Election Date: 11/08/2022

Name of Location: **MARICOPA COUNTY JUVENILE COURT - DB - VC# 15734**

BOX 1 OF 1

Arrival Time: 12:17

Were there ballots to be picked up?

☐

YES <If YES, complete lines 1-5

☒

NO <If NO, complete lines 2-5

Completed Forms picked up?

☐

YES

☒

NONE

IS 22005924 IS 22005923

1) Red Box Seals # _____ & _____ <Indicate the seal numbers that were placed on ballot transport box

2) Ballot Box Sealed/Checked on (Date) 10/14/22 (Time) 12:18 <Date and time box was sealed/checked

3) Location Staff Member (Signature) NA

4) Transport Staff Member (Signature) _____

5) Transport Staff Member (Signature) _____

Departure Time: 12:17

Transport Receipt

This portion to be completed by the Receiving Agent at the MCTEC Facility

Receiving Agent (Signature) Jenice Bessler

Sign to acknowledge receipt from Transport Staff Member

Date/Time: 12/14/22 3:13

Date of Audit Match

Ballot Box Seals # 1522005924 & 1522005923 90 <If applicable, verify the seal numbers on the box match the above from location

Count of Ballots in Transport Bin # 0

Audit Agent (Signature) J. McLean

Sign to affirm seal #'s match or that no ballots were to be picked up

Date/Time: 10/14/22 3:14

Date of Audit Match

